



Serving Valley, Elmore, Boise and Ada Counties

Main Office • 707 N. Armstrong Pl. • Boise Id 83704-0825 • (208) 327-7499 • Fax 327-8533

CHILD CARE CENTER PLAN REVIEW AND APPROVAL FORM

____ New ____ Remodeled or Altered Reviewing Public Health Specialist: _____

NAME	ADDRESS	PHONE
Establishment:		
Owner/Operator:		
Designer:		

- A. **Submit plans prior to construction.** Properly prepared plans and specifications for construction, remodeling, or alteration must be submitted to the District Health Department for review and approval. Such plans should include a floor plan of the childcare center.
- B. **APPROVAL of the plans and specifications is required prior to the start of construction/remodel.**
- C. **Submit** a childcare application with the appropriate fee.
- D. **Preoperational/Final inspection:** The District Health Department must be notified of a request for preoperational inspection when 80% of the construction/remodel is completed-i.e. floor, walls, ceiling and equipment up and running.
- E. After plans are reviewed and approved, applicant must sign final page accepting responsibility and verifying that it is understood that the childcare center will be built in accordance with the approved plans.

Date plan reviewed: _____

Approved by: _____
Public Health Specialist

The intention of the plan review is to provide a child care facility that will operate in a manner that will protect the health and safety of children. By interpretation or definition the Idaho State Code Title 39, Chapter 11, Sections 39-1110(1)(2)(3)(5)(6) discusses child care facilities operating in a clean and sanitary manner, preventing cross contamination and the spread of communicable diseases. These sections of the code reflect the requirements on the following plan review checklist. In addition to the requirements we have added recommendations that will be of assistance in operating an efficient child care facility.

Ada / Boise County Office
707 N. Armstrong Place
Boise ID 83704
Enviro. Health: 327-7499
FAX: 327-8553

Elmore County Office
520 E. 8th Street N.
Mountain Home ID 83647
Enviro. Health: 587-9225
FAX: 587-3521

Valley County Office
703 N. 1st Street
P.O. Box 1448
Mc Call ID 83638
Ph: 634-7194 FAX: 634-2174

A. FOOD PROTECTION SECTION 39-1110 (1)(2)

PLANS			REQUIREMENTS OR RECOMMENDATIONS
YES	NO	NA	
			KITCHEN:
			1. Separate hand wash sink
			2. Dish Washing
			a. Domestic dish machine (Note: Domestic dish machine shall be top of the line with a sanitation cycle)
			b. 3-compartment sink
			c. Commercial dish machine
			Note: Floor sink or drain recommended).
			Recommendation:
			Commercial model dish machine or two (2) domestic dish machines if enrollment is over one hundred (100) and if infant bottles are being washed
			3. Food/vegetable preparation sink – indirectly wasted to sewer with a one-inch air gap
			4. Cooking equipment
			5. Food Storage (no bare wood shelves)

Comments:

B. WATER SUPPLY AND SEWAGE DISPOSAL SECTION 39-1110 (1-2)(6)

PLANS			REQUIREMENTS
YES	NO	NA	
			Water Supply:
			1. Public water supply (name of approved supplier/system)
			2. Private supply (name of approved supplier/system)
			Note: If the center operates with 25 or more individuals the owner must comply with Idaho Public Drinking Water Rules. Contact Central District Health Department for information.
			3. Sewage Disposal
			Septic System approved by the Health Authority. (Must be of proper size for the number of individuals using the facility)
			b. Approved central or municipal sewer system

Comments:

C. TOILET AND HANDWASHING FACILITIES 39-1110 (5)

PLANS			REQUIREMENTS OR RECOMMENDATIONS
YES	NO	NA	
			1. Toilets
			Recommendations:
			Toddler toilets for potty training
			Restrooms in each classroom
			2. Hand washing sinks
			a. Single lever faucets
			b. Tempering Valve
			c. Maximum water temperature of 110 °F
			3. Hand sinks outside of restroom (Art projects, cleanup prior to eating)

Comments:

D. STRUCTURAL DESIGN AND MATERIALS

AREA	FLOOR	WALL	CEILING
Dining Area			
Kitchen			
Toilet Rooms			
Janitorial Room/Area			
High Chair Area			
Hand-washing Area			
Sink Areas			
Recommendation: FRP for wall covering.			

E. INFANT ROOM

PLANS			REQUIREMENTS OR RECOMMENDATIONS
YES	NO	NA	
			1. Sinks
			a. Hand washing sink
			b. Bottle preparation sink
			2. Under counter refrigeration
			Recommendations:
			2 or 3-Compartment sink for bottle washing
			Domestic dish machine with sani-cycle
			Separate sleeping room
			Separate play area

Comments:

F. Play Area Section 39-1110 (4)

PLANS			REQUIREMENTS
YES	NO	NA	
			Play Yard
			1. Swings- 6-8 feet from fences and walls, anchored
			2. Slides not facing south
			3. Irrigation ditches or ponds fenced or covered
			4. Fences 6 feet tall on perimeter
			5. Window wells covered

Comments:

G. Other Operations

PLANS			REQUIREMENTS
YES	NO	NA	
			1. Water heater adequately sized for kitchen and all sinks used in building: _____ gallons
			2. Mop/Service sink
			a. Atmospheric Vacuum breaker
			b. Rack or hooks for hanging mops to dry
			3. Water fountain of sanitary design and not located in toilet room
			4. Electrical outlets
			a. Safety caps
			b. Counter top height above floor
			c. Electrical outlets with built in safety device
			5. Coat storage
			a. Cubbies
			b. Coat hooks or hangers
			6. Yard Faucets
			a. AVB on hose bibs
			b. Sprinkler system equipped with AVB double check valve
			7. Fire safety
			a. Smoke Detectors
			b. Fire Suppression System
			c. Fire Extinguisher

Comments:

H. Miscellaneous Recommendations

PLANS			
YES	NO	NA	
			1. Minimum of six hundred (600) square feet for one and two year old rooms
			2. Storage for art supplies, cleaning compounds, and diapers
			3. Doors leading out to play yard from classroom
			4. Security at front entry
			5. Counter top for parent check-in
			6. Employee break area
			7. Area for sick child

I have read and understand and agree to comply with the above listed requirements and accept responsibility for any changes needed when not in compliance.

Signed: _____

Firm/Company: _____

Date: _____

Copy of plan review given to: _____